

**Missouri Division of Workforce Development**  
**Equal Opportunity Review**

**Agency:**

**Monitor(s):**

**Date:**

- 1. Name of Local EO Officer or Representative:**
- 2. Review Policies/Procedures, Contracts, and Plans for assurance statement:**
- 3. Review Posters and Flyers for compliance with 29 CFR Part 37:**
- 4. Review EO Complaint Log/File for compliance with 29 CFR Part 37:**
- 5. Inspect facility for compliance with 29 CFR Part 37:**
- 6. Review programs for compliance with 29 CFR Part 37:**
- 7. Prepare report of equal opportunity findings and recommendations:**
- 8. Review equal opportunity corrective action plans:**